

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Robert J. EIN

**Title:** THERAPEUTIC APPARATUS

Appl. No.: New application

<sup>2</sup> Filing Date: January 26, 2001

Examiner: Not yet assigned

Art Unit: Not yet assigned

HC972 U.S. PRO  
09/769727  
04/26/01

**UTILITY PATENT APPLICATION**  
**TRANSMITTAL**

Commissioner for Patents  
Washington, D.C. 20231

Box PATENT APPLICATION

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Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Robert J. Ein

Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- [ X ] Specification, Claim(s), and Abstract (49 pages).
- [ X ] Informal drawings (31 sheets, Figures 1-27B).
- [ X ] Unexecuted Declaration and Power of Attorney ( 3 pages).
- [ ] Assignment of the invention to OMNITEK INCORPORATED.
- [ ] Assignment Recordation Cover Sheet.
- [ ] Small Entity statement.
- [ ] Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).

Information Disclosure Statement.

Form PTO-1449 with copies of \_\_\_ listed reference(s).

Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$710.00	\$ 710.00
Total Claims:	58	- 20	= 38	x \$18.00	\$ 684.00
Independents:	3	- 3	= 0	x \$80.00	\$ 0.00
If any Multiple Dependent Claim(s) present:				+ \$270.00	\$ 0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration and late payment of filing fee				+ \$130.00	\$ 130.00
				SUBTOTAL:	\$ 1524.00
<input checked="" type="checkbox"/> Small Entity Fees Apply (subtract 1/2 of above):					\$ 762.00
				TOTAL FILING FEE:	\$ 762.00

A check in the amount of \$0.00 to cover the filing fee is enclosed.

The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: January 26, 2001

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